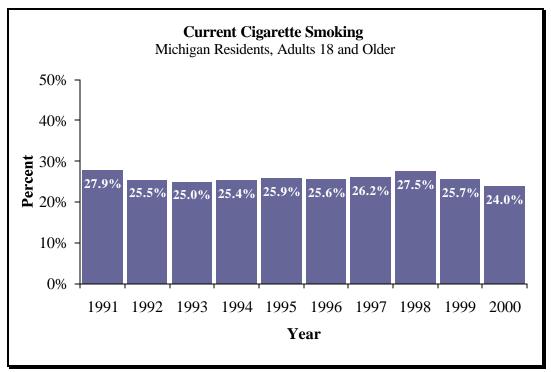
Focused Indicators

Health Risk Behaviors Cigarette Smoking



Source: Bureau of Epidemiology, MDCH

How are we doing?

Cigarette smoking is the single most preventable cause of premature death. It contributes to:

- heart disease, stroke, and chronic obstructive pulmonary disease;
- cancer of the lung, larynx, mouth, esophagus, cervix, and bladder; and
- low birth weight babies.

An estimated 16,000 Michigan residents die each year from tobacco-caused illnesses. On average, smokers die almost seven years earlier than nonsmokers.

The 2000 Michigan Behavioral Risk Factor Survey (BRFS) indicates that 24.0 percent of Michigan adults are current smokers. Smoking rates among Michigan adults have dropped 14.0 percent since 1991, when the smoking prevalence was 27.9 percent.

How does Michigan compare with other states?

In 2000, there was no significant difference between Michigan and the nation in the prevalence of adult smokers. The prevalence of adults smoking in Michigan was 24.0 percent while the median among all the states was 23.3 percent.

Though smoking prevalence has remained relatively steady over the past 10 years, cigarette consumption in Michigan has dropped by an estimated 21.0 percent since 1993. In 1994, Michigan increased its tobacco tax to 75-cents per pack. It is currently the eighth highest rate in the nation.

How are different populations affected?

Respondents with less than a high school education were 3.3 times more likely to report being a current cigarette smoker than those respondents who graduated from college. In addition, the proportion of current cigarette smokers tended to decrease with household income levels and older age groups beginning with the age group 45-54. African-Americans had higher proportions of current smokers than among Caucasians.

For more information about adult health risk behaviors, visit the Michigan Department of Community Health Web site at www.michigan.gov/mdch.

What other information is important to know?

The nicotine in tobacco is one of the most addictive substances available, much more addictive than alcohol and most of the illicit drugs commonly used today. Of current daily smokers in Michigan, more than half reported that they had tried to quit smoking in the past year.

Smoking during pregnancy increases the risk of infant mortality, low birth weight, and the adverse outcomes associated with low birth weight. Estimates from the 1999 Michigan Pregnancy Risk Assessment Monitoring System (PRAMS) survey indicated that 30.5 percent of respondents smoked cigarettes during the three-month period before they became pregnant, 19.1 percent during the last three months of pregnancy, and 25.9 percent during the three-month period immediately following delivery.

What is the Department of Community Health doing to affect this indicator?

The department is actively working to decrease the use of tobacco. Programs to reduce tobacco use include: promoting strong public and voluntary policies to increase the awareness of the dangers of tobacco use and secondhand smoke; to prevent the sale and promotion of tobacco to youth; and to provide a statewide media campaign with prevention, cessation, and secondhand smoke messages.

Initiatives include Medicaid coverage for smoking cessation products, evaluation of a telephone based cessation support program for Medicaid patients, and offering free self-help cessation kits and tobacco related information. Consumer survey information collected from Medicaid beneficiaries indicate that 42 percent of respondents smoke. In addition, the department provides training for health professionals and other service providers, such as those working with pregnant women, to recognize and treat nicotine addiction. A new statewide project focuses on promoting smoke-free hospital campuses and in-patient cessation programs and follow-up. The department also encourages health plans to offer patients routine quitting advice, nicotine replacement

therapy, cessation programs or referral for assistance, and follow-up. Legal assistance is offered to businesses and individuals regarding smoke-free policy development along with research and information on tobacco related laws.

Municipalities are encouraged to develop smoke-free policies and are assisted with clean indoor air issues. Parent groups are educated about the effects of smoking around family members and how to raise tobacco-free children. Many agencies serving communities of color are funded to educate their communities about the dangers of tobacco use and secondhand smoke. Cultural resource networks provide culturally and linguistically appropriate tobacco related materials for the five principal minority groups in the state of Michigan. Coalitions that raise awareness and mobilize communities to decrease the social acceptability of smoking are also supported.

For more information about tobacco control efforts, visit the Michigan Department of Community Health Web site at www.michigan.gov/mdch.

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